Application or Docket Number												nber
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 09 889645												
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTITY	OR		THAN ENTITY
T	OTAL CLAIMS	•	1					RATE	FEE	7	RATE	FEE
F(OR .		NUMBER FILED		NUMBER EXTRA			BASIC FE	≇ 385.00	OR	BASIC FEE	770.00
TO	OTAL CHARGE	ABLE CLAIMS	minus 20=		•			X\$ 9=		OR	X\$18=	
IN	DEPENDENT C	LAIMS	minus 3 =		•			X43=		OR	X86=	
MI	ULTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR		
* If the difference in column 1 is less than zero, enter *0* in column 2											TOTAL	
	C	LAIMS AS A	0	SMALL	ENTITY	OR	OTHER SMALL					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		(Colum Highi NUME PREVIO PAID I	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.23	Minus	- á	\mathcal{O}_{\perp}	- 3		X\$ 9=		OR	X\$18=	51100
AME	Independent	. 3	Minus		3	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			+145=		OR	+290=	
	1							TOTAL			TOTAL	FH.C
(Column 1) (Column 2) (Column 3)											ADDIT. FEE	
AMENDMENT B	Ø	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST IER USLY	PRESENT EXTRA	[RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 27	Minus	. 3	<u>50</u>			X\$ 9=		OR	X\$18=	
	Independent	• 5	Minus	***	3	= 2/	ı	X43=		OR	X88=	400
	FIRST PRESE		ENDENT	DODA	de.		+145=		OR	+290=	7.	
M	ocessed in	- 4/25/06	9	\mathcal{O}	yee	· loka	. A	TOTAL ODIT, FEE	E 1	OR	TOTAL ADDIT. FEE	410
		(Column 1)		(Colum		(Column 3)	gea	U -	Sæ'll	m	N.sti	•
AMENDMENT C	4/24/16	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 22	Minus	- 31		- Ø	Γ	X\$ 9=		OR	X\$18=	·
¥ [Independent	• 5	Minus	*** 5		- ∕0·	T	X43=	·	اير	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		ŀ			OR		$\overline{}$
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
H	the "Highest Nun	nber Previously Pa nber Previously Pa	d For IN THIS	SPACE is	less than	20, enter "20."	A	TOTAL DOTT. FEE		OR A	TOTAL DOTT. FEE]
		ber Previously Paid					foun	d in the app	propriate box	in cot	pmn 1.	·